



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

Douglas B. Moran

Serial No.: 09/651,303

Filed: August 30, 2000

For: EXTENSIBLE INTRUSION DETECTION
SYSTEM

Examiner: Unassigned

Art Unit: 2131

Docket No. RECOP012

November 8, 2000

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, DC 20231 on November 8, 2000.

Signed: _____

Jennifer C. Gross

PRELIMINARY AMENDMENT

Assistant Commissioner for Patents
Washington, DC 20231

Dear Sir:

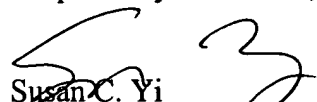
The following amendments and remarks are respectfully submitted.

IN THE SPECIFICATION

On page 1, line 7 please delete [09/615,697] and replace with -09/615,967-.

If at any time the Examiner believes that an interview would be helpful, please contact the undersigned.

Respectfully submitted,


Susan C. Yi
Registration No. 39,883

RITTER VAN PELT AND YI, LLP
4906 El Camino Real, Suite 205
Los Altos, CA 94022
V 650 903 3503
F 650 903 3501

Technology Center 2100

NOV 22 2000

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GP 2131

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In re application of:

Douglas B. Morgan

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Signed

Jennifer C. Gross

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After <u>Amendment</u>	Highest Previously <u>Paid For</u>	Present <u>Extra</u>	SMALL ENTITY <u>RATE FEE</u>	OR	LARGE ENTITY <u>RATE FEE</u>
TOTAL CLAIMS	<u>23</u> -	<u>23</u>	<u>0</u>	X9 = \$	OR	X18 = \$
INDEP CLAIMS	<u>3</u> -	<u>3</u>	<u>0</u>	X40 = \$	OR	X80 = \$
[] Multiple Dependent Claim Present and Fee Not Previously Paid				\$135		\$270
			TOTAL	\$ _____		\$ 0



Applicant(s) hereby petition for a _____ month(s) extension of time to respond to the outstanding Office Action.

☐

Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0685.

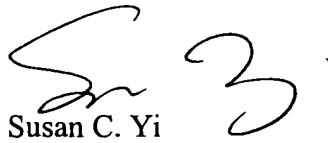
☐

Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.

☒

If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (RECOP012).

Respectfully submitted,



Susan C. Yi
Registration No. 39,883

4906 El Camino Real
Suite 205
Los Altos, CA 94022
Telephone: (650) 903-3500